natural moisture in, and it provides a protective barrier to keep irritants out. This turns out to be petroleum jelly, also known as petrolatum (Vaseline is one brand, and there are others as well). You should apply it to your hands immediately after you bathe, and each time you wash your hands. Carry a small tube with you and reapply it throughout the day.

Once your eczema has cleared and you are no longer using a prescription ointment, your doctor may also suggest using petroleum jelly or a prescription medication on an ongoing basis at night with cotton gloves. In this case, wear the same gloves over and over to help contain the medication. If you dislike petroleum jelly, the next best alternatives are, in order: lubricants, hydrating gels, and creams (like Cetaphil, Neutrogena, and Curel). Urea and lactic acid are helpful ingredients because they help the skin absorb moisture. You need to read all labels carefully to make sure that products don’t contain any ingredients that should be avoided.

NEA has more information about these ingredients. Eventually you’ll be a skilled reader of labels for lotions, shampoos, and other cosmetics.

What ingredients should I avoid? Patch testing can help to determine if you are allergic to specific components of personal care products; after you have been patch tested, your dermatologist will assist you with finding appropriate products. If your doctor has told you that you are sensitive or allergic to a specific substance, avoid products that contain that too. There are a wide variety of additional ingredients, usually preservatives, which can cause skin irritation or allergy, and it’s best to avoid them if you already have hand eczema. When in doubt, use plain petrolatum. It only has one ingredient.

What about “alternative” therapies? Once you have an episode of hand eczema, your risk of having another one increases greatly. For some people, hand eczema becomes chronic. The lack of an easy fix from conventional medicine has led some hand eczema patients to seek alternative treatments. The efficacy of most of these treatments remains unproven. If you do find an alternative that works for you, please share it with the National Eczema Association to help others. If you do decide to try an alternative therapy for your hand eczema, be sure to tell your doctor about it. This is important for coordination of your care.

What are some future therapies? The results of some early studies on the use of oral altretinoin in patients with chronic hand dermatitis resistant to topical corticosteroid therapy have already been published and studies in the United States are ongoing. NEA will keep you apprised of all research and new treatments.

What is the bottom line? Unfortunately, there is no quick and easy solution to hand eczema. Clearing up an episode of the condition can take several months, and you will need to continue caring for your hands for as long as a year, even though they appear eczema free.

Be creative with your hand care and tell us what works! Many people write to NEA to communicate tips, products, and treatments they have discovered to help their hand eczema. Please stay connected with us to learn more and share what works for you!
What is hand eczema?

Hand eczema (also known as hand dermatitis) is a common condition affecting up to 10% of the population. It results from a combination of factors, both internal (e.g. your age, sex, and occupation) and external (e.g. contact with irritants and allergens such as chemicals).

The irritant nature of some chemicals means that hand eczema is particularly common in people with jobs involving solving, catering, healthcare, dressing, and mechanical work. It is an inflammatory condition and is not contagious, but can have a major effect on people’s work, social lives and self-esteem.

The main symptoms of hand eczema include one or more of the following:

- Redness (erythema)
- Itching
- Pain
- Dryness, to the point of peeling and flaking
- Cracks (fissures)
- Vesicles (blister-like fluid-filled pockets)

There is also a specific type of hand eczema called pompholyx (pronounced POM-foe-licks or Pom-foe-licks), known in Greek word for bubble). The cause of pompholyx is unknown and it tends to occur more commonly in women. Each outbreak consists of the appearance of small, pea-sized blisters on the palms of the hands. The condition may come and go over the course of many years, and is notoriously difficult to treat effectively.

What happens at the doctor’s office? It’s only a starting point…

If your hand eczema symptoms have been present for more than a few weeks and do not seem to be getting any better, you should seek treatment from your doctor. Because your hands are in constant use, it is much more difficult to treat hand eczema after it has been present for a while. Your skin will begin to thicken and harden in response to constant rubbing and scratching in such a way that a callus forms on the bottom or side of a heel. This will make it more difficult for any medication to penetrate only enough to have a satisfactory effect. The likelihood of suffering from persistent and chronic hand eczema increases the longer the condition goes undiagnosed and untreated.

Your doctor will ask you about the kinds of activities you engage in at home and at work. It’s very important to be as thorough as you can with your answers, so your doctor can help determine what might be causing the problem. If your hand eczema has persisted for a long time or is unusually severe, the doctor may suggest that you be patch tested to determine if you are allergic to any of the chemicals and allergens you are exposed to on a daily basis at home or at work. Patch testing involves putting different substances on your skin to see how it reacts.

You may receive a prescription for a corticosteroid medication to put on your eczema. (Hint: It will soothe your itching better if you keep it in the refrigerator.) Use topical corticosteroids only as needed—that is, when your hand eczema is actively flaring. Prolonged use of these drugs can cause thinning of the skin, and there are other side effects to consider as well. Perhaps your doctor will recommend a non-corticosteroid topical medication such as betamethasone valerate (Elidel) or pimecrolimus (Eidel). These agents are approved for use by adults and children two years of age or older, and they do not make your skin thin. They should not be used long-term on sun-exposed portions of skin, like the backs of the hands; sunscreen must always be used. Sometimes oral antihistamines can help eczema too. You’ll probably also receive suggestions for hand cleansers or moisturizers free of ingredients that could worsen your eczema.

Beyond that, cleaning up your hand eczema depends largely on how you change your day-to-day habits. These changes may be difficult. Following is a collection of tips for living with hand eczema.

What can I do to protect my hands at home? • Disphanumeric hands are actually a form of hand eczema. It occurs because constant wetting and drying breaks down the skin’s protective outer barrier. Perfurmes and preservatives in contact with irritants in household cleansers can make things worse. If you already have hand eczema or are recovering from an episode, you need to avoid avoiding all irritants whenever possible and drying your hands. Also, clean your rings regularly by soaking them overnight in one tablespoon of ammonia in a pint of water.

- Use the washing machine and the dishwasher, not your hands, to do laundry and dishes. If you must wash dishes by hand, do it under running water. Use a long-handled scrubber to minimize hand damage from hot water.

- For outdoor work, wear unlined leather or thick fabric gloves to protect your hands. Leather gloves also will protect your hands from the wind, or cool.

- Avoid wool because it may be prickly and irritating.

What tools will help? You can find 100-percent cotton “T-shirt knit” gloves at many hobby and craft stores and at professional camera supply stores. Many drug stores and beauty salons also carry these. These are lifesavers for your hands, either worn alone or as liners beneath vinyl or other waterproof gloves. Many people are reluctant to wear “household gloves” because they can cause sweating, which leads in turns to itching and burning. Better wearing a pair of cotton gloves will absorb most of the sweat, and will ensure that your medication or moisturizer stays in contact with your skin. If possible, buy your outer waterproof gloves in a larger size to accommodate the use of liners. Many people go to pharmacy/ medical equipment supply stores, and carry them. These are lifesavers for your hands, to do laundry and dishes. If you must wash dishes by hand, do it under running water. Use a long-handled scrubber to minimize hand damage from hot water.

- Use heavy-duty vinyl or neoprene gloves in tandem with cotton glove liners when doing wet work. Wash the cotton gloves regularly, as well as the vinyl gloves if they aren’t disposable.

- Wear leather or heavy-duty fabric gloves in dry work.

- Avoid using industrial hand cleansers or waterless or antibiotic cleansers that contain irritating ingredients such as alcohol and solvents, especially when your hand eczema is flaring.

- Carry your own hand cleanser, moisturizer, and prescriptions medication to work, and use them to prevent problems.

- Keep your work clothes, protective clothing, tools, and work surfaces clean; irritant resists are often allergens too.

- Treat all minor wounds on your hands, and bandage them, in order to avoid giving irritants and allergens an easy route into your skin.

What about moisturizers? Ironically, the more water there is in a lotion or moisturizer, the more likely it is to cause hand eczema. Moisturizers usually contain more water than oil, and when the water evaporates they have a net drying effect on the skin. The very best moisturizer for hand eczema is a greasy one. It has very few ingredients, it holds the skin’s